# INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (R / 11-09)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL STEWARDSHIP PROGRAM

**Indiana Department of Environmental Management**
Office of Pollution Prevention and Technical Assistance
100 North Senate Avenue
MC 64-00, Room IGCS W041
Indianapolis, IN 46204-2251
Telephone: (800) 988-7901
FAX: (317) 233-5627
E-mail: esp@idem.IN.gov
www.IN.gov/idem/4132.htm

*INSTRUCTIONS: Please use this annual report form if you are a member of the Indiana Environmental Stewardship Program (ESP). Your annual performance report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, FAX, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP program manager at 1-800-988-7901.*

*The Indiana ESP annual performance report should demonstrate progress toward objectives and targets AND certify ESP requirements continue to be achieved. Your annual performance report should cover the previous twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system audit was conducted by your facility. Indiana ESP facilities must submit this annual performance report by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months.*

*Please do not include any confidential business information in your annual performance report. Public access laws require IDEM to make the Annual Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.*

## SECTION A FACILITY INFORMATION

Name of facility
Eli Lilly and Co., Clinton Laboratories

Name of parent company (*If applicable*)

Street address *(number and street)*
10500 South SR 63, P.O. Box 99

City / State / ZIP code
Clinton, Indiana 47842

Facility/Company Web site
http://www.lilly.com/

## CONTACT INFORMATION

Contact name (Mr. / Mrs. / Ms. / Dr.)
Mrs. Olga Jones

Title
Manager, Environmental Quality

Telephone number
765-832-4656

FAX number
765-832-4660

E-mail address
ojones@lilly.com

Mailing address (*if different from facility address*)

City / State / ZIP Code

## REPORTING PERIOD

Reporting period dates (*month, day, year*)
2009

*1a.* Is this the third Annual Performance Report of your membership term?
☒ Yes—If yes, answer question 1b.
☐ No—If no, skip to the "Change in Information" section of this report.

*1b.* Do you wish to renew your Indiana Environmental Stewardship Program membership?
☒ Yes—If yes, please complete all sections of this annual report.
☐ No—If no, please complete all sections of this annual report except for Section D.

## CHANGE IN INFORMATION

In your ESP application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any changes or additions to your facility's list of products or activities?

☐ Yes
☒ No
If yes, please describe them:

**SECTION B** **ENVIRONMENTAL MANAGEMENT SYSTEM ASSESSMENT**

**Why do we need this information?**
IDEM needs information on the performance and assessment of your Environmental Management System (EMS).

**What do you need to do?**
Please summarize your facility's EMS assessments. Attach additional documents if more space is needed.

1. Is your facility currently registered to a recognized third-party EMS standard?

☐ Yes—If yes, when was an EMS audit or other assessment last conducted by an independent third party at your facility?
Type (e.g., ISO 14001 certification) _____
Scope of the audit _____
Month / year _____

☒ No—If no, when was an internal or corporate EMS audit last conducted at your facility?
Scope of the audit Comprehensive review of the HSE EMS
Month / year April 2009

2. When did your facility last conduct an internal or corporate environmental compliance audit? Do not include inspections or site visits by regulatory organizations.
Scope of the audit Assess the level of compliance with environmental regulatory requirements
Month(s) / Year(s) April 2009
Who conducted the audit(s) (e.g., facility staff, corporate, third party) Corporate HSE group with external auditors.

3. (Optional) Please describe any other audits that were conducted at your facility.

4. Has your facility corrected all instances of potential environmental non-compliance and EMS non-conformance identified during your audits and other assessments?

☒ Yes—If yes, briefly summarize corrective actions taken and other improvements made as a result of your EMS assessment(s) or compliance audit(s).
To address the observations and improve the environmental management system several procedures, the SPCC plan and training were revised.

☐ No—If no, please explain your plans to correct these instances.

☐ No such instances identified.

5. Explain the emergencies experienced within the facility during the past year. Were the applicable emergency and contingency plans detailed in the EMS effective? What changes, if any, have been made to your facility's emergency or contingency plans? In August 2009, Clinton labs had a fire involving equipment in product recovery at which point the emergency was contained within the site and had no impact to the environment and people. Clinton labs emergency and contingency plans outlined in the EMS were effective in the response to this event.

6. When was the last Senior Management review of your EMS completed?
Month / Year March 2010
Who headed the review? Name and title Doug Samuelson, Director Engrg/Maint/HSE

7. When did your facility last conduct a systematic identification or review of your environmental aspects?
Month/Year March 2009

8. (Optional) Please provide a narrative summary of progress made toward EMS objectives and targets other than those reported as an Environmental Performance Initiative in Section C. You may limit the summary to environmental aspects that are *significant* and towards which *progress* has been made during the last calendar year. Attach additional sheets as necessary.

| Environmental aspect | Progress made this year (e.g., quantitative or qualitative improvements, activities conducted) |
|---|---|
| ***Wastewater Volume*** | Due to a significant reduction in water usage the site reduced its wastewater volume by 40%. |
| Waste Management | The site implemented a recycling program for plastic bottles and improved its aluminum can recycling process. |

**SECTION C** **ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS**

**Why do we need this information?**
Facilities need to share the results of the environmental improvement initiative that was pursued during the reporting period.

**What do you need to do?**
Summarize your facility's progress on achieving the initiative you identified in the application or last year's Annual Performance Report.

| Category Energy use<br>Indicator Electricity | Baseline Quantity | Future Goal Quantity | Current Quantity | Cost Savings |
|---|---|---|---|---|
| Calendar year | 2008 | 2009 | 2009 | |
| Actual quantity (per year) | 68,446,000 | 64,648,000 | 65,399,200 | |
| Normalized quantity (per year) | 7893 | 7455 | 7541 | |
| Basis for your normalizing factor (e.g., gallons of paint produced) | Hours of operation (24 hour operation at 99% uptime = 8672 hrs/year) | | | |
| Measurement unit (e.g., pounds) | KWH | | | |

Briefly describe how you achieved improvements for this environmental initiative or, if relevant, any circumstances that delayed progress.
The site's water system pumping was revised by combining several measures. These measures included the elimination of several pumps. These pumps used to operate at all times (24/7). The elimination of these pumps resulted in a savings of 2,190,000 KWH. In addition, changes were made to the operation of the chillers, optimizing the chiller shutdown saving the site 856,800 KWH of electricity, in 2009. The total 2009 energy savings from these two projects adds up to 3,046,800 KWH.

Please list any state, U.S. EPA, or other partnership programs to which you are reporting this data (e.g., Energy Star, Project XL).

(Optional) If your facility has experienced continued results for environmental improvement initiatives pursued in past years of ESP membership, please share those results here.
In 2008, the site installed a new compressor, in the fermentation building. When comparing the KW of the old and new compressor, that were delivering the same amount of air, the estimated energy savings of the new compressor vs. the old compressor is about 80,000 KWH a year.

## SECTION D ENVIRONMENTAL IMPROVEMENT INITIATIVES

**Why do we need this information?**
Facilities need to show they are committed to improving their environmental performance.

**What do you need to do?**
Identify your facility's next environmental improvement initiative. Refer to the Environmental Performance Table and answer the following questions.

*1a.* What **category** have you selected from the Environmental Performance Table? Energy Use

*1b.* What **indicator** have you selected from the Environmental Performance Table? Total (non-transportational) energy use by fuel type

*1c.* All measurements should represent the performance level for the indicator across the entire facility. For many indicators, you may choose to focus your initiative on a specific subset of the indicator (e.g., a specific material, process, VOC, group of toxic air emissions, or particular waste component). Does your initiative include everything covered by the indicator (e.g., all VOCs, all non-hazardous waste), or a specific process, substance, or component (e.g., ethane, cardboard)?

☐ All

☒ Specific

If your initiative is specific to a substance or component, please provide additional detail on your indicator (e.g., specific chemical to be reduced, specific waste component). See attachment 1

*1d.* What activities or process changes do you plan to undertake at your facility to accomplish your initiative (e.g., technology changes in a particular process line, employee training)? Pursue and complete enegry conservation projects (see att.)

*2.* Does this initiative address a significant aspect in your EMS?

☒ Yes

☐ No—please explain why you believe this indicator should be included as an environmental improvement initiative: _____

*3.* Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator?

☐ Yes—please explain how your initiative exceeds regulatory requirements: _____

☒ No

***Stop!*** *If the category listed in Question 1a is Energy Use, Waste, or Air Emissions for Total Greenhouse Gases, please skip Questions 4a – 4b below and turn to Appendix 1 to complete the questions pertaining to the category you listed in Question 1a. After completing the respective table in Appendix 1, return to this section and complete questions 5 and 6. Otherwise, continue answering questions 4-6 below.*

*4a.* What units are you using to quantify this indicator? _____

*4b.* List the baseline annual quantity of the indicator and the annual quantity you are committing to achieve by the future year.

_____ Baseline quantity Year _____

_____ Future year quantity (not including production) Year _____

*5.* Does the quantity presented in the future quantity column represent an absolute goal or a normalized goal?

☐ Normalized goal (i.e., indexed to level of business in baseline year)

☒ Absolute goal (i.e., demonstrates improvement even if production increases)

*6.* Whether your goal is absolute or normalized, you need to provide normalizing factors and normalized quantities in your annual performance reports. Please briefly describe your basis for normalizing. Examples of potential normalizing basis include: gallons of paint produced, square feet of circuit boards sold, number of patients seen, dollars of sales adjusted for inflation, or number of employees (for R&D and administrative sites only).

Hours of operation in a year

## SECTION E PUBLIC OUTREACH AND PERFORMANCE REPORTING

**Why do we need this information?**
IDEM needs to know how environmental information was shared with the public.

**What do you need to do?**
Describe how the facility has shared and plans to share environmental information.

Please briefly describe the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to report publicly on its environmental performance.

On a quarterly basis Clinton labs hosts the Community Advisory Panel meetings and hosts an annual neighbor meeting at which time topics pertaining to our sites environmental performance are presented. In addition, the site also hosts tours that includes visits to the wildlife habitat restoration area.

Please indicate which of the following methods your facility plans to use to make its ESP Annual Performance Report available to the public. Please check as many as appropriate.

☐ Web site (http://www._____) ☐ Open house ☒ Meetings ☐ Press releases ☒ Community advisory panel

☐ Other

**SECTION F** **ADDITIONAL INFORMATION**

**Why do we need this information?**
This information will help IDEM to effectively manage the Environmental Stewardship Program.

**What do you need to do?**
Answer the questions as completely as possible.

1. In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months.
   > In 2009 Clinton labs Wildlife Habitat team submitted the application to obtain certification for the "Wildlife at Work". In October 2009 the site obtained obtained the "Wildlife at Work" certification.
   > The site participates in the global Day of Service, a volunteer initiative to help address local community needs.

2. Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider.
   The site worked with the IDEM staff to develop a flexible air permit for the animal health manufacturing process. The permit was issued in October 2009

3. If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration?
   At this point, the site is not pursuing ISO 14001 certification.

**CERTIFICATION AND PLEDGE**

On behalf of (*name of facility*) Eli Lilly and Company, Clinton Laboratories ,

I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.

We, _____ , commit to maintaining the principles and goals outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years.

I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report.

| Signature | Title<br>General Manager, Clinton Laboratories | Date (month, day, year) |
|---|---|---|
| Printed signature | | |

Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA
ESP Program Manager
MC 64-00, Room IGCS W041
100 North Senate Avenue
Indianapolis, IN 46204-2251

FAX: 317-233-5627
E-mail: esp@idem.IN.gov

**APPENDIX 1** **ENVIRONMENTAL PERFORMANCE DATA**

**Energy use - non-transportation**

In the table below, please enter the amount of energy that you currently use and that you intend to use in your future reporting year. Break the energy use down by fuel type. Please note that you need only complete those lines that are relevant to your facility. If all of your energy is purchased from a local electricity generator, you may only need to complete the first line. If the facility uses natural gas, please be sure to complete the appropriate line (natural gas is typically combusted on site so it is listed in the "onsite" section). After completing the table, return to question 5 and complete the remaining application questions.

*4a.* Is the goal of your energy use commitment to:

☐ Reduce hazardous waste ☐ Improve waste management methods ☐ Combination of both strategies

*4b.* How much energy of each type does your facility use?

| | | Baseline year 2009 | Future year 2010 | Units |
|---|---|---|---|---|
| Energy Generated Off-Site | Electricity | 4,862,000 | 3,202,000 | KWH |
| | Steam | | | |
| | **Total energy generated off-site** | | | |
| Sources of Energy Generated On-Site | Coal | | | |
| | Natural gas | | | |
| | Crude oil | | | |
| | Fuel oil | | | |
| | Diesel | | | |
| | Propane / LPG | | | |
| | Gasoline | | | |
| | Hydrogen powered fuel cells | | | |
| | Natural gas / methane powered fuel cells | | | |
| | Biomass | | | |
| | Solar | | | |
| | Wind | | | |
| | Landfill gas | | | |
| | Geothermal | | | |
| | Hydroelectric | | | |
| | Tire derived fuel | | | |
| | Other fuel or source Specify: _____ | | | |
| | **Total energy generated on-site** | | | |
| **Total renewable energy use** | | | | |
| **Total non-renewable energy use** | | | | |
| **Total energy use** | | | | |
| **Metric tons of CO2 equivalents** | | | | |
| **Metric tons of CO2 equivalents** | | | | |
| **Offset through purchases of electricity from renewable off-site sources** | | | | |
| **Net metric tons of CO2 equivalents** | | | | |

**Waste - Non-hazardous waste generation**

In the table below, please enter your facility's amount of non-hazardous waste, broken down by waste management method. Please enter both the amounts you manage currently and that you intend to manage in your future reporting year. "Waste" is defined as all materials sent off-site that are neither product nor product packaging. After completing the table, return to question 4 and complete the remaining application questions.

*4a.* Is the goal of your non-hazardous waste commitment to:

☐ Reduce hazardous waste ☐ Improve waste management methods ☐ Combination of both strategies

*4b.* How much of your waste is handled using each management method?

| Method of waste managed | Baseline year 20____ | Future year 20____ | Units |
|---|---|---|---|
| Landfill | | | |
| Incineration | | | |
| Reused/recycled off-site | | | |
| Other management - specify: _____ | | | |
| **Total non-hazardous waste** | | | |

**Waste - Hazardous waste generation**
In the table below, please enter your facility's amount of hazardous waste, broken down by waste management method. Please enter both the amounts that you manage currently and that you intend to manage in your future reporting year. Include all hazardous waste that is treated on-site or sent off-site. After completing the table, return to question 4 and complete the remaining application questions.

*4a.* Is the goal of your hazardous waste commitment to:

☐ Reduce hazardous waste ☐ Improve waste management methods ☐ Combination of both strategies

*4b.* How much of your hazardous waste is handled using each management method?

| **Method of waste managed** | **Baseline year 20____** | **Future year 20____** | **Units** |
|---|---|---|---|
| Landfill | | | |
| Incineration | | | |
| Reused/recycled off-site | | | |
| Treated on-site | | | |
| Other management specify: ____ | | | |
| **Total hazardous waste** | | | |

**Air emissions – Total greenhouse gases**
In the table below, please enter your facility's amount of greenhouse gases, broken down by process and source. Please enter both the amounts that you manage currently and that you intend to manage in your future reporting year. After completing the table, return to question 4 and complete the remaining application questions.

*4a.* Is the goal of your Total Greenhouse Gases commitment to:

☐ Reduce energy use ☐ Reduce process-related emissions ☐ Combination of both strategies

*4b.* How much greenhouse gas does your facility emit from each source?

| **Source** | | **Baseline year 20____** | **Future year 20____** | **Units** |
|---|---|---|---|---|
| Direct Emissions | Stationary combustion | | | |
| | Mobile sources | | | |
| | Refrigeration/AC equipment use | | | |
| | Process/Fugitive Specify source: _____ | | | |
| | Process/Fugitive Specify source: _____ | | | |
| | Process/Fugitive Specify source: _____ | | | |
| | **Total direct emissions Process/Fugitive** | | | |
| Indirect Emissions | Purchased electricity | | | |
| | Purchased steam | | | |
| | Purchased hot water | | | |
| | **Total indirect emissions** | | | |
| Optional Indirect Emissions | Other Specify source: _____ | | | |
| | Other Specify source: _____ | | | |
| | Other Specify source: _____ | | | |
| | **Total optional indirect emissions** | | | |
| Offsets | Offsets Specify source: _____ | | | |
| | Offsets Specify source: _____ | | | |
| | Offsets Specify source: _____ | | | |
| | **Total reductions from offsets** | | | |
| | **Total emissions less offsets** | | | |
| Supplemental Information | Total CFC | | | |
| | Total HCFC | | | |
| | Total stationary combustion – biomass CO2 | | | |
| | Total mobile sources – biomass CO2 | | | |
| | Electricity trading transactions- electricity purchase for resale | | | |